



FEBRUARY 2005 MONTHLY REPORT

Health Insurance Risk Sharing Plan (HIRSP)
February 2005 Monthly Statistics

	February-05	August-04
BANK SUMMARY		
CHECKWRITE	\$6,206,499.10	\$5,305,242.97
BOOK BALANCE (US Bank & State General Account)	\$47,057,865.00	\$43,792,481.00
ENROLLMENT		
PLAN 1A	7,642	8,233
PLAN 1B	9,110	8,386
PLAN 2	1,704	1,746
TOTAL	18,456	18,365
NEW APPLICATIONS RECEIVED	530	444
CLAIMS		
CLAIMS PROCESSED	100,233	91,442
AVERAGE PROCESSING DAYS	14	13
CLAIM INVENTORY - OVER 30 DAYS OLD	467	989
CLAIM INVENTORY - TOTAL	6,234	10,827
CLAIMS DENIED (Non-PBM)	11,143	9,070
CLAIMS DENIED (PBM)	7,627	8,297
CLAIM ACCURACY PERFORMANCE	100.00%	100.00%
CUSTOMER SERVICE - HIRSP		
NUMBER OF CALLS RECEIVED	10,618	9,174
PERCENTAGE OF CALLS ANSWERED	91.2%	94.4%
WRITTEN CORRESPONDENCE - RECEIVED	680	606
WRITTEN CORRESPONDENCE - COMPLETED	651	594
WRITTEN CORRESPONDENCE - INVENTORY	62	30
AVERAGE HOLD TIME FOR TELEPHONE CALLS	3.67	2.42

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
FEBRUARY 2005 MONTHLY REPORT
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Wisconsin Health Insurance Risk-Sharing Plan

Breakdown of Incurred Claims and Earned Premium by Quarter and Plan

2Q03					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$20,093,745	\$9,858,100	203.8%	\$788.73	\$386.96
Plan 1B	6,985,035	6,664,640	104.8%	348.83	332.83
Plan 2	4,052,899	1,796,687	225.6%	771.83	342.16
Total	\$31,131,679	\$18,319,427	169.9%	\$613.42	\$360.97
3Q03					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$20,425,786	\$10,846,522	188.3%	\$801.51	\$425.62
Plan 1B	7,400,227	7,649,161	96.7%	354.48	366.41
Plan 2	4,232,056	2,062,401	205.2%	813.54	396.46
Total	\$32,058,070	\$20,558,083	155.9%	\$621.74	\$398.71
4Q03					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$22,620,202	\$10,825,220	209.0%	\$889.02	\$425.45
Plan 1B	9,605,456	8,013,666	119.9%	437.15	364.71
Plan 2	4,452,800	2,062,818	215.9%	854.83	396.01
Total	\$36,678,457	\$20,901,704	175.5%	\$696.96	\$397.17
1Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$19,633,688	\$10,273,986	191.1%	\$800.13	\$418.70
Plan 1B	9,723,589	8,769,984	110.9%	404.17	364.54
Plan 2	4,060,489	2,060,924	197.0%	776.83	394.28
Total	\$33,417,766	\$21,104,894	158.3%	\$620.88	\$392.12
2Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$22,369,310	\$10,446,926	214.1%	\$893.34	\$417.21
Plan 1B	11,151,931	9,078,492	122.8%	447.58	364.36
Plan 2	4,927,220	2,092,994	235.4%	937.45	398.21
Total	\$38,448,461	\$21,618,413	177.9%	\$696.38	\$391.55
3Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$21,409,758	\$11,627,516	184.1%	\$863.96	\$469.21
Plan 1B	11,202,682	10,348,024	108.3%	441.09	407.43
Plan 2	5,082,697	2,438,376	208.4%	978.76	469.55
Total	\$37,695,137	\$24,413,917	154.4%	\$680.76	\$440.91

NOTES:

- Loss Ratio = Incurred Claims / Earned Premiums
- Earned Premium includes Premium Subsidies
- Incurred Claims include Provider Contributions
- Administrative Expenses are not included in this exhibit
- Incurred Claims and Earned Premiums are updated quarterly and restated to reflect the most current information available as of December 31, 2004

Note: Due to the Board decision to change the definition of program cost on a retrospective basis, the 1Q04 and 2Q04 claims and loss ratios are lower than those found in prior monthly reports. Please see the notes provided on page 3 of the Monthly Report for a summary of the changes.

**Wisconsin Health Insurance Risk Sharing Plan
Financial Report Notes
For the Period Ending February 28, 2005**

The financial statement values for January-November 2004 in this February Monthly Report have been restated from those found in prior monthly reports. The restatements are due to a HIRSP Board of Governors decision to revise HIRSP's definition of program costs. The definition of program costs that HIRSP has been using since 1998 was based on billed charges less a fixed percentage discount for medical (non-pharmacy) services. The discounts vary by service category and the percentages have not changed since 1998.

Due to the rising costs in the HIRSP program, the Board adopted a change in the discounts from roughly an aggregate discount of 20% to an aggregate discount of 30%. As a result, the HIRSP U&C was reduced by a multiple of 0.875 $(1-0.30)/(1-0.20)$. This change was made retroactive to January 1, 2004. This change is meant to continue through June 30, 2005 when a new methodology for determining future program costs will be implemented.

The following table shows calendar year 2004 under the original basis, the revised basis and the resulting changes:

HIRSP Summary Impact of Program Changes			
	Original Basis	Revised Basis	Resulting Changes
Total Operating Expenses	\$174,246,511	\$157,076,768	(\$17,169,743)
Required Shares			
Policyholders	\$102,883,919	\$92,582,076	(\$10,301,843)
Providers	36,759,562	33,325,612	(3,433,950)
Insurers	36,759,557	33,325,607	(3,433,950)
Ending Balances			
Policyholders	(\$653,169)	\$9,648,674	\$10,301,843
Providers	12,698,909	(1,036,887)	(13,735,796)
Insurers	1,517,534	4,951,484	3,433,950

The motions adopted by the Board regarding the changes summarized above are as follows:

- 1) Effective January 1, 2004 through June 30, 2005, program costs are to be defined such that the HIRSP medical U&C is 87.5% of the current percentages.
- 2) Convene the Actuarial Advisory Subcommittee for the purpose of advising the FOC and Board regarding a market-based benchmark for program costs for use in establishing the SFY06 Budget.
- 3) The Board acknowledges that the current problem of the growing provider contribution and program costs is a function of several factors including increasing provider charges and provider payment rates not keeping pace with inflation. The Board acknowledges that the above referenced motion is an interim solution and would have recommended a 5% provider payment increase effective March 1, 2005 if not for administrative issues associated with the April 1, 2005 transition of plan administrators. The Board will reduce the SFY06 provider surplus by \$1.5 million to compensate for not changing the provider payment rate effective April 1, 2005.

**Wisconsin Health Insurance Risk Sharing Plan
Financial Report Notes
For the Period Ending February 28, 2005**

These monthly reports do not include the June 30, 2002 CAFR¹ (Combined Annual Financial Report) adjustments. When these adjustments are available, the monthly report will reflect these changes. Previously issued monthly reports will not be reissued but the financial statement notes for the current month will summarize the CAFR adjustment.

1) Policyholder Retained Earnings, End of Period (page 3 & 9)

The policyholder retained earnings include both assigned and the unassigned surplus (see Interim Reconciliation page 6 and 12 for the breakdown).

2) Other Receivables (page 7 & 13)

Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.

3) Losses Paid or Approved for Payment (page 3 & 9)

Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.

¹ CAFR is the State of Wisconsin annual financial report published by DOA (Dept of Admin) and prepared in accordance with GASB (Governmental Accounting Standards Board).

Wisconsin Health Insurance Risk Sharing Plan
for the Period Ended February 28, 2005 (July - November Restated)
Fiscal Year 2005

Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings													
Operating Revenues	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
Gross Premiums	7,872,385	8,059,267	8,197,318	8,098,529	7,994,788	8,143,915	8,239,786	8,033,854	-	-	-	-	64,639,842
Premium Subsidized	(332,487)	(337,487)	(355,614)	(355,279)	(358,351)	(359,019)	(354,700)	(328,871)	-	-	-	-	(2,781,808)
Net Premium Revenues	7,539,898	7,721,780	7,841,704	7,743,250	7,636,437	7,784,896	7,885,086	7,704,983	-	-	-	-	61,858,034
Provider Contribution	2,822,174	1,994,216	2,677,124	1,737,174	3,067,418	3,437,726	2,255,043	2,337,067	-	-	-	-	20,327,942
Insurer Assessments	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,716,349	2,716,349	-	-	-	-	21,580,870
Total Operating Revenues	13,053,434	12,407,358	13,210,190	12,171,786	13,395,217	13,913,984	12,856,478	12,758,399	-	-	-	-	103,766,846
Operating Expenses													
Medical Losses:													
Losses Paid or Approved for Payment ⁽⁹⁾	9,435,534	7,139,835	5,619,849	10,545,095	8,955,173	12,759,804	8,738,080	8,587,330	-	-	-	-	71,780,700
Increase (Decrease) in Unpaid Losses	1,140,327	(11,402)	3,859,488	(3,260,495)	2,212,678	233,998	(1,174,533)	(984,629)	-	-	-	-	2,015,432
Deductible Subsidy Paid	56,140	35,944	37,736	60,666	34,034	39,816	59,708	78,706	-	-	-	-	402,750
Total Medical Losses	10,632,001	7,164,377	9,517,073	7,345,266	11,201,885	13,033,618	7,623,255	7,681,407	-	-	-	-	74,198,882
Pharmacy Losses:													
Losses Paid or Approved for Payment	3,455,297	5,261,686	3,541,388	3,670,974	3,732,490	3,773,000	3,656,006	3,495,680	-	-	-	-	30,586,521
Increase (Decrease) in Unpaid Losses	553,645	(1,412,550)	361,325	268,803	516,342	702,134	(178,275)	116,814	-	-	-	-	928,238
Drug Rebates	(91,621)	(136,238)	(229,261)	(107,406)	(108,778)	(172,591)	(122,005)	(120,325)	-	-	-	-	(1,088,225)
Subsidy - Coinsurance Out-of-Pocket Max	19,025	20,562	20,660	31,667	20,879	21,711	12,515	12,515	-	-	-	-	159,534
Total Pharmacy Losses	3,936,346	3,733,460	3,694,112	3,864,038	4,160,933	4,324,254	3,368,241	3,504,684	-	-	-	-	30,586,068
Total Losses	14,568,347	10,897,837	13,211,185	11,209,304	15,362,818	17,357,872	10,991,496	11,186,091	-	-	-	-	104,784,950
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
DHFS Admin Fees	38,870	52,788	21,209	22,329	55,715	35,961	23,186	37,147	-	-	-	-	287,205
EDS Admin Fees	72,709	71,453	76,389	74,342	78,537	75,430	76,867	75,812	-	-	-	-	601,539
UGS Admin Fees	245,436	239,647	253,435	241,145	241,777	259,593	239,028	241,709	-	-	-	-	1,961,770
Milliman USA Actuarial Services	10,500	6,857	8,982	8,103	2,846	16,597	22,888	54,942	-	-	-	-	131,715
Other Admin Fees	12,075	18,441	28,026	51,993	(28,714)	27,894	18,597	12,287	-	-	-	-	140,599
Total Administrative Expenses	379,590	389,186	388,041	397,912	350,161	415,475	380,566	421,897	-	-	-	-	3,122,828
Referral fees	8,785	8,798	7,350	8,575	8,785	9,835	7,035	4,607	-	-	-	-	63,770
Total Operating Expenses	14,956,722	11,295,821	13,606,576	11,615,791	15,721,764	17,783,182	11,379,097	11,612,595	-	-	-	-	107,971,548
Net Operating Income (Loss)	(1,903,288)	1,111,537	(396,386)	555,995	(2,326,547)	(3,869,198)	1,477,381	1,145,804	-	-	-	-	(4,204,702)
Non-Operating Revenues (Expenses)													
Federal Grant	-	-	-	2,222,903	-	-	-	-	-	-	-	-	2,222,903
Investment income	40,452	39,550	42,044	58,615	63,927	76,234	79,968	67,563	-	-	-	-	468,353
Total Non-operating Revenues (Expenses)	40,452	39,550	42,044	2,281,518	63,927	76,234	79,968	67,563	-	-	-	-	2,691,256
Net Income (Loss)	(1,862,836)	1,151,087	(354,342)	2,837,513	(2,262,620)	(3,792,964)	1,557,349	1,213,367	-	-	-	-	(1,513,446)
Additions to Retained Earnings													
Policyholder													
Retained Earnings, Beginning of Period	10,106,007	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	-	-	-	-	10,106,007
Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(957,113)	1,395,914	152,032	2,645,698	(1,312,053)	(2,381,811)	1,575,865	1,252,788	-	-	-	-	2,371,320
Retained Earnings, End of Period⁽¹⁾	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	-	-	-	-	12,477,327
Providers													
Retained Earnings, Beginning of Period	883,278	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	-	-	-	-	883,278
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(349,873)	(442,734)	(231,108)	(335,020)	(259,799)	(301,631)	(203,800)	(163,741)	-	-	-	-	(2,287,706)
Retained Earnings, End of Period	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	(1,404,428)	-	-	-	-	(1,404,428)
Insurers													
Retained Earnings, Beginning of Period	6,459,308	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	-	-	-	-	6,459,308
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(480,685)	254,413	(216,870)	619,168	(635,855)	(1,047,995)	257,507	215,541	-	-	-	-	(1,034,776)
Retained Earnings, End of Period	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	5,424,532	-	-	-	-	5,424,532
Unfunded Deductible and Coinsurance Subsidy													
Retained Earnings, Beginning of Period	(223,692)	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	-	-	-	-	(223,692)
Current Earnings	(75,165)	(56,506)	(58,396)	(92,333)	(54,913)	(61,527)	(91,221)	(91,221)	-	-	-	-	(562,284)
Retained Earnings, End of Period	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	(785,976)	-	-	-	-	(785,976)
Total Retained Earnings	15,362,065	16,513,152	16,158,810	18,996,323	16,733,703	12,940,739	14,498,088	15,711,455	-	-	-	-	15,711,455

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
2005 FISCAL YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSE
AS OF FEBRUARY 28, 2005

MISC REVENUE	JUL 04	AUG	SEP	OCT	NOV	DEC	JAN 05	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
TOTAL MISC REVENUE	-	-	-	-	-	-	-	-	-	-	-	-	-

MISC ADMIN EXP	JUL 04	AUG	SEP	OCT	NOV	DEC	JAN 05	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
Bank Service Charge													-
Postage	9,875.07	16,390.65	26,325.77	50,293.38	(30,413.90)	25,518.78	16,896.89	10,586.78					125,473.42
LAB Audit Fee	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00					13,600.00
Speed Scribe													-
UW Extension													-
NASCHIP	500.00	350.00											850.00
Legal Services													-
Prest & Assoc-Ind Med Review						675.00							675.00
													-
													-
													-
													-
													-
													-
TOTAL MISC ADMIN EXP	12,075.07	18,440.65	28,025.77	51,993.38	(28,713.90)	27,893.78	18,596.89	12,286.78	-	-	-	-	140,598.42

Wisconsin Health Insurance Risk Sharing Plan
Fiscal Year 2005 Interim Reconciliation
As Of February 28, 2005 (July - November Restated)

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
1. Operating and Administrative Costs under s.149.143(1)													
Medical Losses Paid or Approved for Payment	9,435,534	7,139,835	5,619,849	10,545,095	8,955,173	12,759,804	8,738,080	8,587,330	-	-	-	-	71,780,700
Increase (Decrease) in Unpaid Medical Losses	1,140,327	(11,402)	3,859,488	(3,260,495)	2,212,678	233,998	(1,174,533)	(984,629)	-	-	-	-	2,015,432
Pharmacy Losses Paid or Approved for Payment	3,455,297	5,261,686	3,541,388	3,670,974	3,732,490	3,773,000	3,656,006	3,495,680	-	-	-	-	30,586,521
Increase (Decrease) in Unpaid Pharmacy Losses	553,645	(1,412,550)	361,325	268,803	516,342	702,134	(178,275)	116,814	-	-	-	-	928,238
Drug Rebates	(91,621)	(136,238)	(229,261)	(107,406)	(108,778)	(172,591)	(122,005)	(120,325)	-	-	-	-	(1,088,225)
Total Administrative Expenses	388,375	397,984	395,391	406,487	358,946	425,310	387,601	426,504	-	-	-	-	3,186,598
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	14,881,557	11,239,315	13,548,180	11,523,458	15,666,851	17,721,655	11,306,874	11,521,374	-	-	-	-	107,409,264
2. Adjustments to Operating and Administrative Costs													
Total Non-operating Revenue (Expense)	40,452	39,550	42,044	2,281,518	63,927	76,234	79,968	67,563	-	-	-	-	2,691,256
3. Total Fiscal Year Program Costs to be Split 60% 20% 20%	14,841,105	11,199,765	13,506,136	9,241,940	15,602,924	17,645,421	11,226,906	11,453,811	-	-	-	-	104,718,008
4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)													
Funding Shares													
60% Policyholders	8,904,663	6,719,859	8,103,682	5,545,164	9,361,754	10,587,253	6,736,144	6,872,287	-	-	-	-	62,830,806
20% Providers	2,968,221	2,239,953	2,701,227	1,848,388	3,120,585	3,529,084	2,245,381	2,290,762	-	-	-	-	20,943,601
20% Insurers	2,968,221	2,239,953	2,701,227	1,848,388	3,120,585	3,529,084	2,245,381	2,290,762	-	-	-	-	20,943,601
5. Subsidy Funding Shares													
Premium subsidies	332,487	337,487	355,614	355,279	358,351	359,019	354,700	328,871	-	-	-	-	2,781,808
Deductible Subsidies	56,140	35,944	37,736	60,666	34,034	39,816	59,708	78,706	-	-	-	-	402,750
Subsidy - coinsurance out-of-pocket Max	19,025	20,562	20,660	31,667	20,879	21,711	12,515	12,515	-	-	-	-	159,534
Total Subsidies	407,652	393,993	414,010	447,612	413,264	420,546	426,923	420,092	-	-	-	-	3,344,092
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	203,826	196,997	207,005	223,806	206,632	210,273	213,462	210,046	-	-	-	-	1,672,047
Insurers	203,826	196,996	207,005	223,806	206,632	210,273	213,461	210,046	-	-	-	-	1,672,045
6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)													
Policyholders	8,904,663	6,719,859	8,103,682	5,545,164	9,361,754	10,587,253	6,736,144	6,872,287	-	-	-	-	62,830,806
Providers	3,172,047	2,436,950	2,908,232	2,072,194	3,327,217	3,739,357	2,458,843	2,500,808	-	-	-	-	22,615,648
Insurers	3,172,047	2,436,949	2,908,232	2,072,194	3,327,217	3,739,357	2,458,842	2,500,808	-	-	-	-	22,615,646
7. Non-GPR Revenues by Source Including GPR Subsidies Under s.20.435(4)(ah)													
Policyholders													
Premium	7,539,898	7,721,780	7,841,704	7,743,250	7,636,437	7,784,896	7,885,086	7,704,983	-	-	-	-	61,858,034
Premium and Deductible Subsidies Credited to Policyholders	407,652	393,993	414,010	447,612	413,264	420,546	426,923	420,092	-	-	-	-	3,344,092
Subtotal	7,947,550	8,115,773	8,255,714	8,190,862	8,049,701	8,205,442	8,312,009	8,125,075	-	-	-	-	65,202,126
Providers	2,822,174	1,994,216	2,677,124	1,737,174	3,067,418	3,437,726	2,255,043	2,337,067	-	-	-	-	20,327,942
Insurers	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,716,349	2,716,349	-	-	-	-	21,580,870
Total	13,461,086	12,801,351	13,624,200	12,619,398	13,808,481	14,334,530	13,283,401	13,178,491	-	-	-	-	107,110,938

Wisconsin Health Insurance Risk Sharing Plan
Fiscal Year 2005 Interim Reconciliation
As Of February 28, 2005 (July - November Restated)

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
8. Interim Estimate of Surplus/(Deficit) Account Balance for FY 2005													
Policyholders													
Prior Period Surplus / (Deficit)	10,106,007	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	-	-	-	-	10,106,007
Premium (Including Premium and Deductible Subsidies)	7,947,550	8,115,773	8,255,714	8,190,862	8,049,701	8,205,442	8,312,009	8,125,075	-	-	-	-	65,202,126
Less Cost	8,904,663	6,719,859	8,103,682	5,545,164	9,361,754	10,587,253	6,736,144	6,872,287	-	-	-	-	62,830,806
Less Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(957,113)	1,395,914	152,032	2,645,698	(1,312,053)	(2,381,811)	1,575,865	1,252,788	-	-	-	-	2,371,320
Ending Surplus / (Deficit)	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	-	-	-	-	12,477,327
Assigned Surplus to SFY 2005	-	-	-	-	-	-	-	-	-	-	-	-	-
Unassigned Surplus	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	-	-	-	-	12,477,327
Providers													
Prior Period Surplus / (Deficit)	883,278	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	-	-	-	-	883,278
Contribution	2,822,174	1,994,216	2,677,124	1,737,174	3,067,418	3,437,726	2,255,043	2,337,067	-	-	-	-	20,327,942
Less Cost	3,172,047	2,436,950	2,908,232	2,072,194	3,327,217	3,739,357	2,458,843	2,500,808	-	-	-	-	22,615,648
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(349,873)	(442,734)	(231,108)	(335,020)	(259,799)	(301,631)	(203,800)	(163,741)	-	-	-	-	(2,287,706)
Ending Surplus / (Deficit)	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	(1,404,428)	-	-	-	-	(1,404,428)
Insurers													
Prior Period Surplus / (Deficit)	6,459,308	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	-	-	-	-	6,459,308
Assessment	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,716,349	2,716,349	-	-	-	-	21,580,870
Less Cost	3,172,047	2,436,949	2,908,232	2,072,194	3,327,217	3,739,357	2,458,842	2,500,808	-	-	-	-	22,615,646
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(480,685)	254,413	(216,870)	619,168	(635,855)	(1,047,995)	257,507	215,541	-	-	-	-	(1,034,776)
Ending Surplus / (Deficit)	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	5,424,532	-	-	-	-	5,424,532
Unfunded Deductible and Coinsurance Subsidy													
Prior Period Surplus / (Deficit)	(223,692)	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	-	-	-	-	(223,692)
Monthly Change	(75,165)	(56,506)	(58,396)	(92,333)	(54,913)	(61,527)	(72,223)	(91,221)	-	-	-	-	(562,284)
Ending Surplus / (Deficit)	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	(785,976)	-	-	-	-	(785,976)
Total HIRSP Retained Earnings	15,362,065	16,513,152	16,158,810	18,996,323	16,733,703	12,940,739	14,498,088	15,711,455	-	-	-	-	15,711,455

Note: Due to the Board decision to change the definition of program cost on a retrospective basis, various components for July-November 2004 will not match those found in prior monthly reports. Please see the notes provided on page 3 of the Monthly Report for a summary of the changes.

Wisconsin Health Insurance Risk Sharing Plan
February 28, 2005 (July - November Restated)
Fiscal Year 2005

Unaudited Balance Sheet

Assets	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Cash and Cash Equivalents	44,175,497	43,792,481	55,529,616	53,382,423	45,505,246	50,307,256	43,348,568	47,057,865	-	-	-	-
Other Receivables ⁽²⁾	39,541	109,277	138,752	200,118	136,931	111,735	96,643	125,560	-	-	-	-
Drug Rebates Receivable	694,465	830,703	1,059,964	1,167,370	1,276,148	1,124,746	1,246,751	1,051,895	-	-	-	-
Assessments Receivable	2,781,901	896,397	348,845	742,609	516,473	641,364	3,357,262	94,485	-	-	-	-
Prepaid Items	57,739	71,349	45,023	34,879	95,293	69,774	52,878	42,291	-	-	-	-
Total Assets	47,749,143	45,700,207	57,122,200	55,527,399	47,530,091	52,254,875	48,102,102	48,372,096	-	-	-	-
Liabilities and Fund Equity												
Liabilities:												
Unpaid Medical loss Liabilities	16,129,059	16,120,582	18,992,225	16,540,725	18,210,671	18,388,346	17,498,548	16,751,485	-	-	-	-
Unpaid Prescription Drug Loss Liabilities	2,198,353	785,803	1,147,128	1,415,931	1,932,273	2,634,407	2,456,132	2,572,946	-	-	-	-
Unpaid Loss Adjustment Expense	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	-	-	-	-
Unearned Premiums	12,626,044	6,831,139	16,957,036	12,608,063	6,784,926	16,833,222	12,599,991	7,023,489	-	-	-	-
Unearned Assessments	-	3,966,257	2,604,678	4,463,813	2,605,723	-	2,260	5,010,790	-	-	-	-
Accounts Payable and Other Accrued Liabilities	773,622	823,274	602,323	842,544	602,795	798,161	387,083	641,931	-	-	-	-
Total Liabilities	32,387,078	29,187,055	40,963,390	36,531,076	30,796,388	39,314,136	33,604,014	32,660,641	-	-	-	-
Fund Equity:												
Policyholder	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	-	-	-	-
Providers	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	(1,404,428)	-	-	-	-
Insurers	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	5,424,532	-	-	-	-
Unfunded Deductible and Coinsurance Subsidy	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	(785,976)	-	-	-	-
Total Retained Earnings	15,362,065	16,513,152	16,158,810	18,996,323	16,733,703	12,940,739	14,498,088	15,711,455	-	-	-	-
Total Liabilities and Fund Equity	47,749,143	45,700,207	57,122,200	55,527,399	47,530,091	52,254,875	48,102,102	48,372,096	-	-	-	-

Note: Due to the Board decision to change the definition of program cost on a retrospective basis, the fund equity components for July-November 2004 will not match those found in prior monthly reports
Please see the notes provided on page 3 of the Monthly Report for a summary of the changes.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
MONTHLY PROVIDER CONTRIBUTION REPORT
AS OF FEBRUARY 28, 2005

PROVIDER SHARE CALCULATION FOR THE CURRENT MONTH - CLAIMS BY CLAIM TYPE					
REGULAR CLAIMS					
CLAIM TYPE / CATEGORY	BILLED CHARGES	U & C PERCENTAGE	USUAL AND CUSTOMARY	LESS HIRSP ALLOWED CHARGES	PROVIDER SHARE
CT 20 & 39/20 PROFESSIONAL	6,425,731.11	36.0%	4,115,680.77	2,716,547.38	1,399,133.39
CT 23 & 39/23 HOSPITAL OUTPATIENT	3,397,235.75	27.5%	2,464,269.89	2,050,545.56	413,724.33
CT 24 & 39/24 OTHER	347,846.62	23.9%	264,767.80	253,173.52	11,594.28
CT 40 & 49/40 HOSPITAL INPATIENT	5,331,296.88	28.1%	3,832,669.33	3,082,350.04	750,319.29
CT 41 & 59/41 OTHER	-	23.9%	-	-	-
TOTAL	\$ 15,502,110.36		\$ 10,677,387.79	\$ 8,102,616.50	\$ 2,574,771.29

CROSSOVER CLAIMS					
CLAIM TYPE / CATEGORY	MEDICARE ALLOWED CHARGES	MEDICARE PAID	HIRSP PAID	HIRSP DEDUCTIBLE/ COINSURANCE	PROVIDER SHARE
CT 30 & 39/30 PROFESSIONAL	546,603.93	397,910.21	89,806.10	58,280.71	606.91
CT 31 & 39/31 HOSPITAL OUTPATIENT	487,409.83	362,556.88	92,614.11	32,984.11	(745.27)
CT 50 & 49/50 HOSPITAL INPATIENT	1,647,806.61	1,580,210.61	55,047.81	12,548.19	-
CT 51 & 59/51 OTHER	15,800.46	11,748.96	4,051.50	-	-
TOTAL CROSSOVER	\$ 2,697,620.83	\$ 2,352,426.66	\$ 241,519.52	\$ 103,813.01	\$ (138.36)

PROVIDER CONTRIBUTION ON THE INCREASE (DECREASE) IN UNPAID LOSSES	\$ (237,566.00)
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TOTAL PROVIDER CONTRIBUTION NON-PHARMACY	\$ 2,337,066.93
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PHARMACY CLAIMS					
CLAIM TYPE / CATEGORY	BILLED CHARGES	U & C PERCENTAGE	USUAL AND CUSTOMARY	LESS HIRSP ALLOWED CHARGES	PROVIDER SHARE
CT 10 & 19/10 PRESCRIPTION DRUG CLAIMS NOT PROCESSED THROUGH PBM	-	0.00%	-	-	-
CT 10 & 19/10 PRESCRIPTION DRUG CLAIMS PROCESSED THROUGH PBM	6,262,466.57	0.00%	4,013,727.69	4,013,727.69	
TOTAL PROVIDER CONTRIBUTION PHARMACY	6,262,466.57		4,013,727.69	4,013,727.69	

Wisconsin Health Insurance Risk Sharing Plan
for the Period Ended February 28, 2005
Calendar Year 2005

Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings													
Operating Revenues	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Gross Premiums	8,239,786	8,033,854	-	-	-	-	-	-	-	-	-	-	16,273,640
Premium Subsidized	(354,700)	(328,871)	-	-	-	-	-	-	-	-	-	-	(683,571)
Net Premium Revenues	7,885,086	7,704,983	-	-	-	-	-	-	-	-	-	-	15,590,069
Provider Contribution	2,255,043	2,337,067	-	-	-	-	-	-	-	-	-	-	4,592,110
Insurer Assessments	2,716,349	2,716,349	-	-	-	-	-	-	-	-	-	-	5,432,698
Total Operating Revenues	12,856,478	12,758,399	-	-	-	-	-	-	-	-	-	-	25,614,877
Operating Expenses													
Medical Losses:													
Losses Paid or Approved for Payment ⁽³⁾	8,738,080	8,587,330	-	-	-	-	-	-	-	-	-	-	17,325,410
Increase (Decrease) in Unpaid Losses	(1,174,533)	(984,629)	-	-	-	-	-	-	-	-	-	-	(2,159,162)
Deductible Subsidy Paid	59,708	78,706	-	-	-	-	-	-	-	-	-	-	138,414
Total Medical Losses	7,623,255	7,681,407	-	-	-	-	-	-	-	-	-	-	15,304,662
Pharmacy Losses:													
Losses Paid or Approved for Payment	3,656,006	3,495,680	-	-	-	-	-	-	-	-	-	-	7,151,686
Increase (Decrease) in Unpaid Losses	(178,275)	116,814	-	-	-	-	-	-	-	-	-	-	(61,461)
Drug Rebates	(122,005)	(120,325)	-	-	-	-	-	-	-	-	-	-	(242,330)
Subsidy - Coinsurance Out-of-Pocket Max	12,515	12,515	-	-	-	-	-	-	-	-	-	-	25,030
Total Pharmacy Losses	3,368,241	3,504,684	-	-	-	-	-	-	-	-	-	-	6,872,925
Total Losses	10,991,496	11,186,091	-	-	-	-	-	-	-	-	-	-	22,177,587
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
DHFS Admin Fees	23,186	37,147	-	-	-	-	-	-	-	-	-	-	60,333
EDS Admin Fees	76,867	75,812	-	-	-	-	-	-	-	-	-	-	152,679
UGS Admin Fees	239,028	241,709	-	-	-	-	-	-	-	-	-	-	480,737
Milliman USA Actuarial Services	22,888	54,942	-	-	-	-	-	-	-	-	-	-	77,830
Other Admin Fees	18,597	12,287	-	-	-	-	-	-	-	-	-	-	30,884
Total Administrative Expenses	380,566	421,897	-	-	-	-	-	-	-	-	-	-	802,463
Referral fees	7,035	4,607	-	-	-	-	-	-	-	-	-	-	11,642
Total Operating Expenses	11,379,097	11,612,595	-	-	-	-	-	-	-	-	-	-	22,991,692
Net Operating Income (Loss)	1,477,381	1,145,804	-	-	-	-	-	-	-	-	-	-	2,623,185
Non-Operating Revenues (Expenses)													
Federal Grant	-	-	-	-	-	-	-	-	-	-	-	-	-
Investment income	79,968	67,563	-	-	-	-	-	-	-	-	-	-	147,531
Total Non-operating Revenues (Expenses)	79,968	67,563	-	-	-	-	-	-	-	-	-	-	147,531
Net Income (Loss)	1,557,349	1,213,367	-	-	-	-	-	-	-	-	-	-	2,770,716
Additions to Retained Earnings													
Policyholder													
Retained Earnings, Beginning of Period	9,648,674	11,224,539	-	-	-	-	-	-	-	-	-	-	9,648,674
Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	1,575,865	1,252,788	-	-	-	-	-	-	-	-	-	-	2,828,653
Retained Earnings, End of Period ⁽¹⁾	11,224,539	12,477,327	-	-	-	-	-	-	-	-	-	-	12,477,327
Providers													
Retained Earnings, Beginning of Period	(1,036,887)	(1,240,687)	-	-	-	-	-	-	-	-	-	-	(1,036,887)
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(203,800)	(163,741)	-	-	-	-	-	-	-	-	-	-	(367,541)
Retained Earnings, End of Period	(1,240,687)	(1,404,428)	-	-	-	-	-	-	-	-	-	-	(1,404,428)
Insurers													
Retained Earnings, Beginning of Period	4,951,484	5,208,991	-	-	-	-	-	-	-	-	-	-	4,951,484
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	257,507	215,541	-	-	-	-	-	-	-	-	-	-	473,048
Retained Earnings, End of Period	5,208,991	5,424,532	-	-	-	-	-	-	-	-	-	-	5,424,532
Unfunded Deductible and Coinsurance Subsidy													
Retained Earnings, Beginning of Period	(622,532)	(694,755)	-	-	-	-	-	-	-	-	-	-	(622,532)
Current Earnings	(72,223)	(91,221)	-	-	-	-	-	-	-	-	-	-	(163,444)
Retained Earnings, End of Period	(694,755)	(785,976)	-	-	-	-	-	-	-	-	-	-	(785,976)
Total Retained Earnings	14,498,088	15,711,455	-	-	-	-	-	-	-	-	-	-	15,711,455

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
2005 CALENDAR YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSE
AS OF FEBRUARY 28, 2005

MISC REVENUE	JAN 05	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
TOTAL MISC REVENUE	-	-	-	-	-	-	-	-	-	-	-	-	-

MISC ADMIN EXP	JAN 05	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YEAR TO DATE TOTAL
Bank Service Charge													-
Postage	16,896.89	10,586.78											27,483.67
LAB Audit Fee	1,700.00	1,700.00											3,400.00
Speed Scribe													-
UW Extension													-
NASCHIP													-
Legal Services													-
Prest & Assoc-Ind Med Review													-
													-
													-
													-
													-
													-
TOTAL MISC ADMIN EXP	18,596.89	12,286.78	-	-	-	-	-	-	-	-	-	-	30,883.67

Wisconsin Health Insurance Risk Sharing Plan
Calendar Year 2005 Interim Reconciliation
As Of February 28, 2005

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
1. Operating and Administrative Costs under s.149.143(1)													
Medical Losses Paid or Approved for Payment	8,738,080	8,587,330	-	-	-	-	-	-	-	-	-	-	17,325,410
Increase (Decrease) in Unpaid Medical Losses	(1,174,533)	(984,629)	-	-	-	-	-	-	-	-	-	-	(2,159,162)
Pharmacy Losses Paid or Approved for Payment	3,656,006	3,495,680	-	-	-	-	-	-	-	-	-	-	7,151,686
Increase (Decrease) in Unpaid Pharmacy Losses	(178,275)	116,814	-	-	-	-	-	-	-	-	-	-	(61,461)
Drug Rebates	(122,005)	(120,325)	-	-	-	-	-	-	-	-	-	-	(242,330)
Total Administrative Expenses	387,601	426,504	-	-	-	-	-	-	-	-	-	-	814,105
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	11,306,874	11,521,374	-	-	-	-	-	-	-	-	-	-	22,828,248
2. Adjustments to Operating and Administrative Costs													
Total Non-operating Revenue (Expense)	79,968	67,563	-	-	-	-	-	-	-	-	-	-	147,531
3. Total Calendar Year Program Costs to be Split 60% 20% 20%	11,226,906	11,453,811	-	-	-	-	-	-	-	-	-	-	22,680,717
4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)													
Funding Shares													
60% Policyholders	6,736,144	6,872,287	-	-	-	-	-	-	-	-	-	-	13,608,431
20% Providers	2,245,381	2,290,762	-	-	-	-	-	-	-	-	-	-	4,536,143
20% Insurers	2,245,381	2,290,762	-	-	-	-	-	-	-	-	-	-	4,536,143
5. Subsidy Funding Shares													
Premium subsidies	354,700	328,871	-	-	-	-	-	-	-	-	-	-	683,571
Deductible Subsidies	59,708	78,706	-	-	-	-	-	-	-	-	-	-	138,414
Subsidy - coinsurance out-of-pocket Max	12,515	12,515	-	-	-	-	-	-	-	-	-	-	25,030
Total Subsidies	426,923	420,092	-	-	-	-	-	-	-	-	-	-	847,015
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	213,462	210,046	-	-	-	-	-	-	-	-	-	-	423,508
Insurers	213,461	210,046	-	-	-	-	-	-	-	-	-	-	423,507
6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)													
Policyholders	6,736,144	6,872,287	-	-	-	-	-	-	-	-	-	-	13,608,431
Providers	2,458,843	2,500,808	-	-	-	-	-	-	-	-	-	-	4,959,651
Insurers	2,458,842	2,500,808	-	-	-	-	-	-	-	-	-	-	4,959,650
7. Non-GPR Revenues by Source Including GPR Subsidies Under s.20.435(4)(ah)													
Policyholders													
Premium	7,885,086	7,704,983	-	-	-	-	-	-	-	-	-	-	15,590,069
Premium and Deductible Subsidies Credited to Policyholders	426,923	420,092	-	-	-	-	-	-	-	-	-	-	847,015
Subtotal	8,312,009	8,125,075	-	-	-	-	-	-	-	-	-	-	16,437,084
Providers	2,255,043	2,337,067	-	-	-	-	-	-	-	-	-	-	4,592,110
Insurers	2,716,349	2,716,349	-	-	-	-	-	-	-	-	-	-	5,432,698
Total	13,283,401	13,178,491	-	-	-	-	-	-	-	-	-	-	26,461,892

Wisconsin Health Insurance Risk Sharing Plan
Calendar Year 2005 Interim Reconciliation
As Of February 28, 2005

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
8. Interim Estimate of Surplus/(Deficit) Account Balance for CY 2004													
Policyholders													
Prior Period Surplus / (Deficit)	9,648,674	11,224,539	-	-	-	-	-	-	-	-	-	-	9,648,674
Premium (Including Premium and Deductible Subsidies)	8,312,009	8,125,075	-	-	-	-	-	-	-	-	-	-	16,437,084
Less Cost	6,736,144	6,872,287	-	-	-	-	-	-	-	-	-	-	13,608,431
Less Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	1,575,865	1,252,788	-	-	-	-	-	-	-	-	-	-	2,828,653
Ending Surplus / (Deficit)	11,224,539	12,477,327	-	-	-	-	-	-	-	-	-	-	12,477,327
Assigned Surplus to SFY 2005	-	-	-	-	-	-	-	-	-	-	-	-	-
Unassigned Surplus	11,224,539	12,477,327	-	-	-	-	-	-	-	-	-	-	12,477,327
Providers													
Prior Period Surplus / (Deficit)	(1,036,887)	(1,240,687)	-	-	-	-	-	-	-	-	-	-	(1,036,887)
Contribution	2,255,043	2,337,067	-	-	-	-	-	-	-	-	-	-	4,592,110
Less Cost	2,458,843	2,500,808	-	-	-	-	-	-	-	-	-	-	4,959,651
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(203,800)	(163,741)	-	-	-	-	-	-	-	-	-	-	(367,541)
Ending Surplus / (Deficit)	(1,240,687)	(1,404,428)	-	-	-	-	-	-	-	-	-	-	(1,404,428)
Insurers													
Prior Period Surplus / (Deficit)	4,951,484	5,208,991	-	-	-	-	-	-	-	-	-	-	4,951,484
Assessment	2,716,349	2,716,349	-	-	-	-	-	-	-	-	-	-	5,432,698
Less Cost	2,458,842	2,500,808	-	-	-	-	-	-	-	-	-	-	4,959,650
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	257,507	215,541	-	-	-	-	-	-	-	-	-	-	473,048
Ending Surplus / (Deficit)	5,208,991	5,424,532	-	-	-	-	-	-	-	-	-	-	5,424,532
Unfunded Deductible and Coinsurance Subsidy													
Prior Period Surplus / (Deficit)	(622,532)	(694,755)	-	-	-	-	-	-	-	-	-	-	(622,532)
Monthly Change	(72,223)	(91,221)	-	-	-	-	-	-	-	-	-	-	(163,444)
Ending Surplus / (Deficit)	(694,755)	(785,976)	-	-	-	-	-	-	-	-	-	-	(785,976)
Total HIRSP Retained Earnings	14,498,088	15,711,455	-	-	-	-	-	-	-	-	-	-	15,711,455

Wisconsin Health Insurance Risk Sharing Plan
February 28, 2005
Calendar Year 2005

Unaudited Balance Sheet

Assets	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Cash and Cash Equivalents	43,348,568	47,057,865	-	-	-	-	-	-	-	-	-	-
Other Receivables ⁽²⁾	96,643	125,560	-	-	-	-	-	-	-	-	-	-
Drug Rebates Receivable	1,246,751	1,051,895	-	-	-	-	-	-	-	-	-	-
Assessments Receivable	3,357,262	94,485	-	-	-	-	-	-	-	-	-	-
Prepaid Items	52,878	42,291	-	-	-	-	-	-	-	-	-	-
Total Assets	48,102,102	48,372,096	-	-	-	-	-	-	-	-	-	-
Liabilities and Fund Equity												
Liabilities:												
Unpaid Medical loss Liabilities	17,498,548	16,751,485	-	-	-	-	-	-	-	-	-	-
Unpaid Prescription Drug Loss Liabilities	2,456,132	2,572,946	-	-	-	-	-	-	-	-	-	-
Unpaid Loss Adjustment Expense	660,000	660,000	-	-	-	-	-	-	-	-	-	-
Unearned Premiums	12,599,991	7,023,489	-	-	-	-	-	-	-	-	-	-
Unearned Assessments	2,260	5,010,790	-	-	-	-	-	-	-	-	-	-
Accounts Payable and Other Accrued Liabilities	387,083	641,931	-	-	-	-	-	-	-	-	-	-
Total Liabilities	33,604,014	32,660,641	-	-	-	-	-	-	-	-	-	-
Fund Equity:												
Policyholder	11,224,539	12,477,327	-	-	-	-	-	-	-	-	-	-
Providers	(1,240,687)	(1,404,428)	-	-	-	-	-	-	-	-	-	-
Insurers	5,208,991	5,424,532	-	-	-	-	-	-	-	-	-	-
Unfunded Deductible and Coinsurance Subsidy	(694,755)	(785,976)	-	-	-	-	-	-	-	-	-	-
Total Retained Earnings	14,498,088	15,711,455	-	-	-	-	-	-	-	-	-	-
Total Liabilities and Fund Equity	48,102,102	48,372,096	-	-	-	-	-	-	-	-	-	-

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

EARNED PREMIUM

FISCAL YEAR 2005

EARNED PREMIUM	
MONTH	FY 04
JUL	7,539,898
AUG	7,721,780
SEP	7,841,704
OCT	7,743,250
NOV	7,636,437
DEC	7,784,896
JAN	7,885,086
FEB	7,704,983
MAR	
APR	
MAY	
JUN	
TOTAL	\$61,858,034

**Wisconsin Health Insurance Risk Sharing Plan
Assessment Status**

Total Assessment for 1/1/05 - 6/30/05			1st Installment Due 3/1/05		2nd Installment Due 5/1/05	
Period Ending	Payments Received	A/R Balance	Payments Received	A/R Balance	Payments Received	A/R Balance
01/08/05	-	16,481,262.43	-	8,240,631.22	-	8,240,631.21
01/15/05	-	16,481,262.43	-	8,240,631.22	-	8,240,631.21
01/22/05	-	16,481,262.43	-	8,240,631.22	-	8,240,631.21
01/31/05	2,711.96	16,478,550.47	1,355.97	8,239,275.25	1,355.99	8,239,275.22
Jan Total	\$ 2,711.96		\$ 1,355.97		\$ 1,355.99	
02/05/05	595,211.58	15,883,338.89	450,051.30	7,789,223.95	145,160.28	8,094,114.94
02/12/05	763,456.97	15,119,881.92	432,062.55	7,357,161.40	331,394.42	7,762,720.52
02/19/05	4,248,858.50	10,871,023.42	3,068,504.47	4,288,656.93	1,180,354.03	6,582,366.49
02/28/05	5,006,851.03	5,864,172.39	4,182,726.45	105,930.48	824,124.58	5,758,241.91
Feb Total	\$ 10,614,378.08		\$ 8,133,344.77		\$ 2,481,033.31	
	-	5,864,172.39	-	105,930.48	-	5,758,241.91
	-	5,864,172.39	-	105,930.48	-	5,758,241.91
	-	5,864,172.39	-	105,930.48	-	5,758,241.91
	-	5,864,172.39	-	105,930.48	-	5,758,241.91
	-	5,864,172.39	-	105,930.48	-	5,758,241.91
Mar Total	\$ -		\$ -		\$ -	
	-	5,864,172.39	-	105,930.48	-	5,758,241.91
	-	5,864,172.39	-	105,930.48	-	5,758,241.91
	-	5,864,172.39	-	105,930.48	-	5,758,241.91
	-	5,864,172.39	-	105,930.48	-	5,758,241.91
Apr Total	\$ -		\$ -		\$ -	
	-	5,864,172.39	-	105,930.48	-	5,758,241.91
	-	5,864,172.39	-	105,930.48	-	5,758,241.91
	-	5,864,172.39	-	105,930.48	-	5,758,241.91
	-	5,864,172.39	-	105,930.48	-	5,758,241.91
May Total	\$ -		\$ -		\$ -	
	-	5,864,172.39	-	105,930.48	-	5,758,241.91
	-	5,864,172.39	-	105,930.48	-	5,758,241.91
	-	5,864,172.39	-	105,930.48	-	5,758,241.91
	-	5,864,172.39	-	105,930.48	-	5,758,241.91
June Total	\$ -		\$ -		\$ -	
Grand Total	\$ 10,617,090.04	\$ 5,864,172.39	\$ 8,134,700.74	\$ 105,930.48	\$ 2,482,389.30	\$ 5,758,241.91

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Monthly Applicant Activity February Month End, 2005

	Plan 1A	Plan 1B	Plan 2	Total	
Number of Applications Pending January Month End*, 2005	462	267	17	746	
Number of Applications Received in February, 2005	245	278	7	530	
Number of Applications Rejected in February, 2005	36	10	1	47	
Number of Applications Closed in February, 2005	25	35	1	61	
Number of Applications Pending February End*, 2005	**	476	242	16	734
Number of Applications Approved in February, 2005	170	258	6	434	

* The above numbers are based on Month End which is the last Friday in the Month.

February data includes 1-29-05 to 2-25-05.

**Pending applications include applications received and not processed and applications pending for more information.

	Plan 1A	Plan 1B	Plan 2	Total
Detail of Applications Rejected				
Insufficient premium submitted	15	4	0	19
Eligible for Group Health Plan	11	5	1	17
Current Medicaid coverage	6	1	0	7
Insufficient premium submitted for subsidy level	1	0	0	1
Previous HIRSP < 12 months ago	1	0	0	1
Notice of eligibility submitted; does not qualify	2	0	0	2
Subtotal	36	10	1	47
Detail of Applications Closed				
Applicant Request	8	14	0	22
Proper eligibility requested; never received	11	15	0	26
Application data requested; never received	6	6	1	13
Subtotal	25	35	1	61

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Applicant Eligibility Determination February 2005

A.	Medicare Eligible	6
B.	HIV +	2
C.	Eligible Individual	192
D.	Letter of Medical Eligibility	234
1.	Notice of Rejection by:	
	Blue Cross Blue Shield United of Wisconsin	40
	Humana Insurance Company	35
	Wisconsin Physicians Service Insurance	33
	Fortis Benefits Insurance	25
	American Family	20
	Golden Rule Insurance Company	19
	Mega Life and Health Insurance	18
	Pekin Life Insurance	9
	Security Health Plan	6
	American Medical Security Group	4
	American National	4
	American Republic	4
	Dean Health Plan	4
	Unity Health Plan	4
	Midwest National Life Insurance	2
	Atrium Health Plan	1
	Continental General Insurance Company	1
	Midwest Security Life Insurance	1
	Physicians Plus Insurance	1
2.	Notice of Benefit Reduction	3
3.	Notice of Premium increase due to a Health Reason	0
Total		434

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

FEBRUARY 2005 MONTH END

	Total Subsidy				Total Non-Subsidy					Combined Total*			
	Plan 1A	Plan 2	Total		Plan 1A	Plan 1B	Plan 2	Total		Plan 1A	Plan 1B	Plan 2	Total
March, 2004	3,173	796	3,969		5,072	8,133	948	14,153		8,245	8,133	1,744	18,122
April, 2004	3,175	788	3,963		5,105	8,170	956	14,231		8,280	8,170	1,744	18,194
May, 2004	3,200	791	3,991		5,156	8,330	957	14,443		8,356	8,330	1,748	18,434
June, 2004	3,188	796	3,984		5,210	8,416	968	14,594		8,398	8,416	1,764	18,578
July, 2004	2,939	736	3,675		5,322	8,373	991	14,686		8,261	8,373	1,727	18,361
August, 2004	2,972	741	3,713		5,292	8,478	993	14,763		8,264	8,478	1,734	18,476
September, 2004	2,976	747	3,723		5,278	8,554	982	14,814		8,254	8,554	1,729	18,537
October, 2004	3,001	759	3,760		5,160	8,516	959	14,635		8,161	8,516	1,718	18,395
November, 2004	2,990	765	3,755		5,165	8,549	963	14,677		8,155	8,549	1,728	18,432
December, 2004	3,000	759	3,759		5,159	8,619	958	14,736		8,159	8,619	1,717	18,495
January, 2005	2,939	746	3,685		4,692	9,076	952	14,720		7,631	9,076	1,698	18,405
February, 2005	2,938	749	3,687		4,704	9,110	955	14,769		7,642	9,110	1,704	18,456

Detail of Total Subsidy Policies in Force

	Level 0	Level 1	Level 2	Level 3	Level 4	Level 5	Total
March, 2004	14,153	526	595	739	1,548	561	18,122
April, 2004	14,231	529	600	736	1,540	558	18,194
May, 2004	14,443	523	602	742	1,557	567	18,434
June, 2004	14,594	524	598	740	1,555	567	18,578
July, 2004	14,686	546	545	658	1,355	571	18,361
August, 2004	14,763	548	551	663	1,385	566	18,476
September, 2004	14,814	550	551	666	1,391	565	18,537
October, 2004	14,635	552	545	676	1,425	562	18,395
November, 2004	14,677	551	541	679	1,426	558	18,432
December, 2004	14,736	551	537	680	1,427	564	18,495
January, 2005	14,720	529	524	674	1,433	525	18,405
February, 2005	14,769	527	525	679	1,434	522	18,456

*Level 0 = Income > \$25,000

*Level 1 = Income \$17,000 - \$19,999

*Level 2 = Income \$14,000 - \$16,999

*Level 3 = Income \$10,000 - \$13,999

*Level 4 = Income <=\$9,999

*Level 5 = Income \$20,000 - \$24,999

**Total Policies in Force by Plan, Gender, & Age Group as of
February 28, 2005**

Male

Plan	Gender	Age Group	# Policy holders
1A	Male	0 - 24	426
1A	Male	25 - 29	212
1A	Male	30 - 34	177
1A	Male	35 - 39	255
1A	Male	40 - 44	420
1A	Male	45 - 49	469
1A	Male	50 - 54	550
1A	Male	55 - 59	464
1A	Male	60 - 64	438
1A	Male	65+	2
Total:			3,413

Female

Plan	Gender	Age Group	# Policy holders
1A	Female	0 - 18	168
1A	Female	19 - 24	223
1A	Female	25 - 29	205
1A	Female	30 - 34	196
1A	Female	35 - 39	224
1A	Female	40 - 44	321
1A	Female	45 - 49	477
1A	Female	50 - 54	585
1A	Female	55 - 59	783
1A	Female	60 - 64	1,038
1A	Female	65+	9
Total:			4,229

Plan	Gender	Age Group	# Policy holders
1B	Male	0 - 24	262
1B	Male	25 - 29	48
1B	Male	30 - 34	86
1B	Male	35 - 39	144
1B	Male	40 - 44	305
1B	Male	45 - 49	464
1B	Male	50 - 54	641
1B	Male	55 - 59	880
1B	Male	60 - 64	1,298
1B	Male	65+	6
Total:			4,134

Plan	Gender	Age Group	# Policy holders
1B	Female	0 - 18	84
1B	Female	19 - 24	66
1B	Female	25 - 29	57
1B	Female	30 - 34	76
1B	Female	35 - 39	148
1B	Female	40 - 44	283
1B	Female	45 - 49	486
1B	Female	50 - 54	683
1B	Female	55 - 59	1,177
1B	Female	60 - 64	1,909
1B	Female	65+	7
Total:			4,976

Plan	Gender	Age Group	# Policy holders
2	Male	0 - 24	2
2	Male	25 - 29	13
2	Male	30 - 34	10
2	Male	35 - 39	37
2	Male	40 - 44	74
2	Male	45 - 49	113
2	Male	50 - 54	129
2	Male	55 - 59	108
2	Male	60 - 64	95
2	Male	65+	128
Total:			709

Plan	Gender	Age Group	# Policy holders
2	Female	19 - 24	3
2	Female	25 - 29	2
2	Female	30 - 34	17
2	Female	35 - 39	27
2	Female	40 - 44	71
2	Female	45 - 49	99
2	Female	50 - 54	139
2	Female	55 - 59	146
2	Female	60 - 64	195
2	Female	65+	296
Total:			995

**Total Policies in Force by Plan, Gender, Zone & Age Group
as of February 28, 2005**

Male

Plan	Zone	Gender	Age Group	# Policy holders
1A	1	Male	0 - 24	27
1A	1	Male	25 - 29	26
1A	1	Male	30 - 34	21
1A	1	Male	35 - 39	28
1A	1	Male	40 - 44	40
1A	1	Male	45 - 49	52
1A	1	Male	50 - 54	38
1A	1	Male	55 - 59	40
1A	1	Male	60 - 64	35
Total:				307

Plan	Zone	Gender	Age Group	# Policy holders
1A	2	Male	0 - 24	141
1A	2	Male	25 - 29	70
1A	2	Male	30 - 34	58
1A	2	Male	35 - 39	77
1A	2	Male	40 - 44	130
1A	2	Male	45 - 49	131
1A	2	Male	50 - 54	157
1A	2	Male	55 - 59	117
1A	2	Male	60 - 64	113
1A	2	Male	65+	1
Total:				995

Plan	Zone	Gender	Age Group	# Policy holders
1A	3	Male	0 - 24	258
1A	3	Male	25 - 29	116
1A	3	Male	30 - 34	98
1A	3	Male	35 - 39	150
1A	3	Male	40 - 44	250
1A	3	Male	45 - 49	286
1A	3	Male	50 - 54	355
1A	3	Male	55 - 59	307
1A	3	Male	60 - 64	290
1A	3	Male	65+	1
Total:				2,111

Female

Plan	Zone	Gender	Age Group	# Policy holders
1A	1	Female	0 - 18	11
1A	1	Female	19 - 24	18
1A	1	Female	25 - 29	28
1A	1	Female	30 - 34	17
1A	1	Female	35 - 39	15
1A	1	Female	40 - 44	25
1A	1	Female	45 - 49	38
1A	1	Female	50 - 54	57
1A	1	Female	55 - 59	73
1A	1	Female	60 - 64	75
1A	1	Female	65+	1
Total:				358

Plan	Zone	Gender	Age Group	# Policy holders
1A	2	Female	0 - 18	54
1A	2	Female	19 - 24	76
1A	2	Female	25 - 29	57
1A	2	Female	30 - 34	70
1A	2	Female	35 - 39	74
1A	2	Female	40 - 44	108
1A	2	Female	45 - 49	132
1A	2	Female	50 - 54	162
1A	2	Female	55 - 59	211
1A	2	Female	60 - 64	290
1A	2	Female	65+	4
Total:				1,238

Plan	Zone	Gender	Age Group	# Policy holders
1A	3	Female	0 - 18	103
1A	3	Female	19 - 24	129
1A	3	Female	25 - 29	120
1A	3	Female	30 - 34	109
1A	3	Female	35 - 39	135
1A	3	Female	40 - 44	188
1A	3	Female	45 - 49	307
1A	3	Female	50 - 54	366
1A	3	Female	55 - 59	499
1A	3	Female	60 - 64	673
1A	3	Female	65+	4
Total:				2,633

**Total Policies in Force by Plan, Gender, Zone & Age Group
as of February 28, 2005**

Male

Plan	Zone	Gender	Age Group	# Policy holders
1B	1	Male	0 - 24	14
1B	1	Male	25 - 29	2
1B	1	Male	30 - 34	8
1B	1	Male	35 - 39	23
1B	1	Male	40 - 44	27
1B	1	Male	45 - 49	32
1B	1	Male	50 - 54	36
1B	1	Male	55 - 59	56
1B	1	Male	60 - 64	73
1B	1	Male	65+	1
Total:				272

Female

Plan	Zone	Gender	Age Group	# Policy holders
1B	1	Female	0 - 18	5
1B	1	Female	19 - 24	8
1B	1	Female	25 - 29	5
1B	1	Female	30 - 34	9
1B	1	Female	35 - 39	5
1B	1	Female	40 - 44	16
1B	1	Female	45 - 49	34
1B	1	Female	50 - 54	36
1B	1	Female	55 - 59	72
1B	1	Female	60 - 64	127
Total:				317

Plan	Zone	Gender	Age Group	# Policy holders
1B	2	Male	0 - 24	84
1B	2	Male	25 - 29	9
1B	2	Male	30 - 34	37
1B	2	Male	35 - 39	32
1B	2	Male	40 - 44	102
1B	2	Male	45 - 49	120
1B	2	Male	50 - 54	207
1B	2	Male	55 - 59	237
1B	2	Male	60 - 64	350
Total:				1,178

Plan	Zone	Gender	Age Group	# Policy holders
1B	2	Female	0 - 18	32
1B	2	Female	19 - 24	17
1B	2	Female	25 - 29	15
1B	2	Female	30 - 34	27
1B	2	Female	35 - 39	53
1B	2	Female	40 - 44	75
1B	2	Female	45 - 49	151
1B	2	Female	50 - 54	218
1B	2	Female	55 - 59	358
1B	2	Female	60 - 64	537
1B	2	Female	65+	4
Total:				1,487

Plan	Zone	Gender	Age Group	# Policy holders
1B	3	Male	0 - 24	164
1B	3	Male	25 - 29	37
1B	3	Male	30 - 34	41
1B	3	Male	35 - 39	89
1B	3	Male	40 - 44	176
1B	3	Male	45 - 49	312
1B	3	Male	50 - 54	398
1B	3	Male	55 - 59	587
1B	3	Male	60 - 64	875
1B	3	Male	65+	5
Total:				2,684

Plan	Zone	Gender	Age Group	# Policy holders
1B	3	Female	0 - 18	47
1B	3	Female	19 - 24	41
1B	3	Female	25 - 29	37
1B	3	Female	30 - 34	40
1B	3	Female	35 - 39	90
1B	3	Female	40 - 44	192
1B	3	Female	45 - 49	301
1B	3	Female	50 - 54	429
1B	3	Female	55 - 59	747
1B	3	Female	60 - 64	1,245
1B	3	Female	65+	3
Total:				3,172

**Total Policies in Force by Plan, Gender, Zone & Age Group
as of February 28, 2005**

Male

Plan	Zone	Gender	Age Group	# Policy holders
2	1	Male	25 - 29	1
2	1	Male	30 - 34	4
2	1	Male	35 - 39	10
2	1	Male	40 - 44	9
2	1	Male	45 - 49	16
2	1	Male	50 - 54	24
2	1	Male	55 - 59	12
2	1	Male	60 - 64	9
2	1	Male	65+	5
Total:				90

Female

Plan	Zone	Gender	Age Group	# Policy holders
2	1	Female	19 - 24	1
2	1	Female	30 - 34	3
2	1	Female	35 - 39	1
2	1	Female	40 - 44	9
2	1	Female	45 - 49	15
2	1	Female	50 - 54	17
2	1	Female	55 - 59	17
2	1	Female	60 - 64	14
2	1	Female	65+	24
Total:				101

Plan	Zone	Gender	Age Group	# Policy holders
2	2	Male	25 - 29	3
2	2	Male	30 - 34	3
2	2	Male	35 - 39	12
2	2	Male	40 - 44	21
2	2	Male	45 - 49	37
2	2	Male	50 - 54	37
2	2	Male	55 - 59	26
2	2	Male	60 - 64	32
2	2	Male	65+	39
Total:				210

Plan	Zone	Gender	Age Group	# Policy holders
2	2	Female	25 - 29	1
2	2	Female	30 - 34	6
2	2	Female	35 - 39	9
2	2	Female	40 - 44	26
2	2	Female	45 - 49	27
2	2	Female	50 - 54	43
2	2	Female	55 - 59	48
2	2	Female	60 - 64	54
2	2	Female	65+	86
Total:				300

Plan	Zone	Gender	Age Group	# Policy holders
2	3	Male	0 - 24	2
2	3	Male	25 - 29	9
2	3	Male	30 - 34	3
2	3	Male	35 - 39	15
2	3	Male	40 - 44	44
2	3	Male	45 - 49	60
2	3	Male	50 - 54	68
2	3	Male	55 - 59	70
2	3	Male	60 - 64	54
2	3	Male	65+	84
Total:				409

Plan	Zone	Gender	Age Group	# Policy holders
2	3	Female	19 - 24	2
2	3	Female	25 - 29	1
2	3	Female	30 - 34	8
2	3	Female	35 - 39	17
2	3	Female	40 - 44	36
2	3	Female	45 - 49	57
2	3	Female	50 - 54	79
2	3	Female	55 - 59	81
2	3	Female	60 - 64	127
2	3	Female	65+	186
Total:				594

**Total Subsidy/Non-Subsidy
Restated for February 28, 2005**

Plan		# Policyholders
1A	Non-Subsidized	4,704
1A	Subsidized	2,938
1B	Non-Subsidized	9,110
2	Non-Subsidized	955
2	Subsidized	749
Total:		18,456

**Total Subsidy by Level
Restated for February 28, 2005**

Subsidy Level	# Policyholders
Level 0	14,769
Level 1	527
Level 2	525
Level 3	679
Level 4	1,434
Level 5	522
Total:	18,456

**Total Policies in Force by Zone, Plan and Subsidy
Restated for February 28, 2005**

	# Policyholders
Plan 1A, Zone 1, Non-Subsidized	348
Plan 1A, Zone 1, Subsidized	317
Plan 1A, Zone 2, Non-Subsidized	1,430
Plan 1A, Zone 2, Subsidized	803
Plan 1A, Zone 3, Non-Subsidized	2,926
Plan 1A, Zone 3, Subsidized	1,818
Plan 1B, Zone 1, Non-Subsidized	589
Plan 1B, Zone 2, Non-Subsidized	2,665
Plan 1B, Zone 3, Non-Subsidized	5,856
Plan 2, Zone 1, Non-Subsidized	87
Plan 2, Zone 1, Subsidized	104
Plan 2, Zone 2, Non-Subsidized	300
Plan 2, Zone 2, Subsidized	210
Plan 2, Zone 3, Non-Subsidized	568
Plan 2, Zone 3, Subsidized	435
Total:	18,456

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Customer Service Monthly Operating Report February 2005

Feb-05 Week Ending	Calls Offered	Calls Handled	# Abandoned	% Abandoned	Average Wait	Shortest Wait	Longest Wait	Average Talk
5-Feb	2,683	2,446	188	7.0%	2.96	0.00	8.52	3.43
12-Feb	2,643	2,495	142	5.4%	3.01	0.00	10.11	3.71
19-Feb	2,684	2,401	280	10.4%	3.80	0.00	12.02	3.43
26-Feb	2,608	2,283	323	12.4%	4.90	0.00	12.59	3.40
Total	10,618	9,625	933	8.8%	3.67	0.00	12.59	3.49

Historical 2004/2005 Stats	Calls Offered	Calls Handled	# Abandoned	% Abandoned	Average Wait	Shortest Wait	Longest Wait	Average Talk
Feb-04	10,435	9,338	1,097	10.5%	4.43	0.00	14.29	3.22
Mar-04	11,213	9,694	1,519	13.5%	5.03	0.00	13.07	3.10
Apr-04	13,716	12,529	1,187	8.7%	3.56	0.00	11.07	2.87
May-04	9,600	8,908	692	7.2%	2.97	0.00	11.37	3.19
Jun-04	10,572	9,360	1,212	11.5%	4.60	0.00	12.18	3.34
Jul-04	11,453	10,865	588	4.9%	2.79	0.00	8.57	2.88
Aug-04	9,174	8,660	514	5.6%	2.42	0.00	9.34	2.86
Sep-04	10,082	9,203	879	8.7%	3.49	0.00	14.03	2.62
Oct-04	12,889	11,214	1,662	13.0%	4.79	0.00	16.21	3.10
Nov-04	8,708	7,131	1,556	17.9%	6.52	0.00	20.39	3.63
Dec-04	10,048	8,578	1,435	14.6%	5.80	0.00	16.39	3.73
Jan-05	10,390	9,357	1,015	9.6%	4.15	0.00	11.40	3.59
Feb-05	10,618	9,625	933	8.8%	3.67	0.00	12.59	3.49

Most Commonly Asked Questions to Customer Service - February 2005

1. What is my claim status?
2. Is this a covered service?
3. What is the status of my application?

Written Correspondence - February 2005

Written Correspondence - February 2005							
	Beginning Inventory	Received	Completed	Inventory			Ending Inventory
				< 10 days	10-30 days	> 30 days	
Customer Srvc	21	196	185	32	0	0	32
Enrollment	0	396	396	0	0	0	0
Underwriting	12	88	70	29	1	0	30

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

CLAIMS PROCESSED

Claims that have finalized to payment or denial during the month

Claim type/Description	Jan-04	Feb-04	Mar-04	Apr-04	May-04	Jun-04	Jul-04	Aug-04	Sep-04	Oct-04	Nov-04	Dec-04	YTD Total
CT10 Pharmacy (Non-PBM)**	0	0	0	0	0	0	0	0	0	0	0	0	0
CT10 Pharmacy (PBM)***	0	0	0	0	0	0	0	0	0	0	0	0	0
WP Wellpoint Pharmacy ****	58,899	59,759	91,483 ⁽¹⁾	62,203	65,556	62,837	63,948	63,279	64,419	97,667 ⁽¹⁾	66,537	66,837	823,424
CT19 Pharmacy Adjustments (Non-PBM)**	0	0	0	0	0	0	0	0	0	0	0	0	0
CT19 Pharmacy Adj. (PBM) ***	0	0	0	0	0	0	0	0	0	0	0	0	0
WP Wellpoint Reversals *****	-2,475	-2,864	-4,082	-2,709	-3,271	-2,875	-3,006	-3,107	-3,052	-4,868	-3,251	-3,216	-38,776
CT20 Physicians	33,839	30,416	22,807	28,748	25,080	26,444	25,415	19,780	21,881	29,952	24,015	31,495	319,872
CT23 Outpatient Hospital	5,585	4,645	4,107	4,798	4,121	4,083	4,953	3,962	3,571	5,386	4,145	5,705	55,061
CT24 Miscellaneous	2,216	2,228	2,117	2,559	2,216	1,835	2,278	1,823	1,286	2,120	1,921	2,405	25,004
CT30 Professional Crossovers	5,805	4,941	4,116	5,534	4,072	4,465	5,037	3,434	3,675	5,294	3,918	6,286	56,577
CT31 Outpatient Crossovers	1,526	867	1,106	1,291	1,129	1,325	1,216	935	770	1,199	975	1,598	13,937
CT39 Professional Adjustments	469	647	1,446	960	1,298	393	618	857	235	660	372	734	8,689
CT40 Inpatient Hospital	598	428	458	521	423	363	457	380	264	504	430	531	5,357
CT41 Nursing Home	41	62	34	41	31	34	18	10	16	34	18	14	353
CT49 Inpatient Hospital Adjustments	6	10	20	21	16	14	17	3	4	108	9	9	237
CT50 Inpatient Hospital Crossovers	125	86	79	104	87	65	99	71	42	99	75	71	1,003
CT51 Nursing Home Crossovers	14	6	14	12	13	7	19	14	11	36	11	11	168
CT59 Nursing Home Adjustments	0	0	6	2	17	1	0	1	0	0	0	0	27
Total claims processed*	106,648	101,231	123,711	104,085	100,788	98,991	101,069	91,442	93,122	138,191	99,175	112,480	1,270,933

Claim type/Description	Jan-05	Feb-05	Mar-05	Apr-05	May-05	Jun-05	Jul-05	Aug-05	Sep-05	Oct-05	Nov-05	Dec-05	YTD Total
CT10 Pharmacy (Non-PBM)**	0	0											0
CT10 Pharmacy (PBM)***	0	0											0
WP Wellpoint Pharmacy ****	65,765	64,844											130,609
CT19 Pharmacy Adjustments (Non-PBM)**	0	0											0
CT19 Pharmacy Adj. (PBM) ***	0	0											0
WP Wellpoint Reversals *****	-3,393	-3,485											-6,878
CT20 Physicians	24,181	25,644											49,825
CT23 Outpatient Hospital	4,027	4,448											8,475
CT24 Miscellaneous	1,817	1,842											3,659
CT30 Professional Crossovers	4,251	4,592											8,843
CT31 Outpatient Crossovers	1,015	1,211											2,226
CT39 Professional Adjustments	581	549											1,130
CT40 Inpatient Hospital	402	449											851
CT41 Nursing Home	30	26											56
CT49 Inpatient Hospital Adjustments	20	13											33
CT50 Inpatient Hospital Crossovers	73	96											169
CT51 Nursing Home Crossovers	6	4											10
CT59 Nursing Home Adjustments	1	0											1
Total claims processed*	98,776	100,233	0	0	0	0	0	0	0	0	0	0	199,009

*The totals include paper and EMC claims. PBM claims are included in the totals starting with August 2001. In the PBM environment, each prescription processed by the PBM is counted as one claim where, previously, a claim may have included multiple prescriptions. Therefore, due to the change in pharmacy claims processing, the volume of claims processed prior to August 2001 is not comparable to the volume of claims processed in August 2001 and later.

** Pharmacy non-PBM claims are for dates of service prior to August 1, 2001.

*** Pharmacy PBM claims are for dates of service between August 1, 2001 and December 31, 2001; claims were submitted through the Wellpoint system, but paid by the Fiscal Agent.

**** Wellpoint Pharmacy claims are processed solely through the Wellpoint system under the new co-pay guidelines and account for all prescriptions filled beginning January 1, 2002.

*****Wellpoint reversals will always negate a Wellpoint pharmacy claim beginning January 1, 2002.

(1) Increase in claims count is due to an additional pay period. This month includes 3 pay periods.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

AVERAGE CLAIMS PROCESSING DAYS

Claim type/Description*	Feb-04	Mar-04	Apr-04	May-04	Jun-04	Jul-04	Aug-04	Sep-04	Oct-04	Nov-04	Dec-04	Jan-05	Feb-05	
CT10 Pharmacy	0	0	0	0	0	0	0	0	0	0	0	0	0	
CT19 Pharmacy Adjustments	0	0	0	0	0	0	0	0	0	0	0	0	0	
CT20 Physicians	13	13	13	15	11	12	14	16	15	15	14	13	11	
CT23 Outpatient Hospital	13	11	11	13	11	10	11	14	14	13	13	11	12	
CT24 Miscellaneous	16	13	14	15	13	14	14	19	21	24	24	17	18	
CT30 Professional Crossovers	11	11	12	11	10	11	14	15	17	17	17	13	12	
CT31 Outpatient Crossovers	18	17	16	19	15	13	15	19	21	22	25	19	19	
CT39 Professional Adjustments	34	19	23	29	21	15	11	19	21	19	24	17	20	
CT40 Inpatient Hospital	17	15	18	17	16	15	15	17	21	18	17	15	17	
CT41 Nursing Home	15	10	12	11	16	10	17	17	15	14	14	14	15	
CT49 Inpatient Hospital Adjustments	30	24	21	19	14	10	6	19	7	27	26	18	19	
CT50 Inpatient Hospital Crossovers	13	13	12	14	11	9	11	15	15	16	13	12	14	
CT51 Nursing Home Crossovers	11	10	10	6	11	9	9	16	17	11	12	18	15	
CT59 Nursing Home Adjustments	0	19	76	16	24	0	16	16	0	0	0	61	0	
Average for the Month	14	13	14	*****	16	12	12	13	16	*****	16	16	13	14

*A "0" days to process indicates there were no claims submitted for that claim type in that month.

Wellpoint pharmacy claims processed solely through the Wellpoint system are not included in this report for prescriptions filled beginning January 1, 2002.

** No Wellpoint paper claims were paid in May and October. This number includes only non-PBM claims.

***Processing of claims received October 1, 2003 and after did not begin until October 13, 2003 due to HIPAA changes, making the average processing days higher than normal.

****HIPAA changes and a high volume of claims submitted made the average processing days higher than normal

***** Higher than normal claim average resulting from a clean up of aged medical review claims

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
HIRSP MONTH END CLAIMS INVENTORY**

Claim Type / Description	Number of claims to be keyed		Claims in the system being processed (includes claims waiting to be keyed)	
	Total	Over 30 days old	Total	Over 30 days old
February 2004 - All Claim Types	3,163	0	8,050	2,046
March 2004 - All Claim Types	3,502	0	8,156	1,910
April 2004 - All Claim Types	4,429	0	9,582	2,378
May 2004 - All Claim Types	5,387	0	9,401	1,427
June 2004 - All Claim Types	355	0	4,886	1,435
July 2004 - All Claim Types	4,580	0	8,099	1,198
August 2004 - All Claim Types	7,765	0	10,827	989
September 2004 - All Claim Types	7,176	0	11,441	1,437
October 2004 - All Claim Types	7,951	0	12,910	1,813
November 2004 - All Claim Types	6,182	0	10,544	1,897
December 2004 - All Claim Types	4,857	0	8,286	651
January 2005 - All Claim Types	5,224	0	8,925	868
February 2005 - All Claim Types	3,092	0	6,234	467

January 2005

Claim Type / Description		Number of claims to be keyed		Claims in the system being processed (includes claims waiting to be keyed)	
		Total	Over 30 days old	Total	Over 30 days old
CT10	Pharmacy (Non-PBM)	0	0	0	0
CT19	Pharmacy Adjustments (Non-PBM)	0	0	0	0
CT20	Physicians	3,322	0	5,238	617
CT23	Outpatient Hospital	423	0	969	129
CT24	Miscellaneous	469	0	836	42
CT30	Professional Crossovers	689	0	1,190	49
CT31	Outpatient Crossovers	252	0	403	7
CT39	Professional Adjustments	0	0	84	18
CT40	Inpatient Hospital	47	0	168	5
CT41	Nursing Home	4	0	13	0
CT49	Inpatient Hospital Adjustments	0	0	1	0
CT50	Inpatient Hospital Crossovers	18	0	22	1
CT51	Nursing Home Crossovers	0	0	1	0
CT59	Nursing Home Adjustments	0	0	0	0
All Claim Types		5,224	0	8,925	868

February 2005

Claim Type / Description		Number of claims to be keyed		Claims in the system being processed (includes claims waiting to be keyed)	
		Total	Over 30 days old	Total	Over 30 days old
CT10	Pharmacy (Non-PBM)	0	0	0	0
CT19	Pharmacy Adjustments (Non-PBM)	0	0	0	0
CT20	Physicians	2,201	0	3,522	212
CT23	Outpatient Hospital	103	0	650	44
CT24	Miscellaneous	428	0	845	81
CT30	Professional Crossovers	179	0	668	93
CT31	Outpatient Crossovers	151	0	275	5
CT39	Professional Adjustments	0	0	78	18
CT40	Inpatient Hospital	12	0	166	11
CT41	Nursing Home	5	0	10	2
CT49	Inpatient Hospital Adjustments	0	0	4	1
CT50	Inpatient Hospital Crossovers	13	0	16	0
CT51	Nursing Home Crossovers	0	0	0	0
CT59	Nursing Home Adjustments	0	0	0	0
All Claim Types		3,092	0	6,234	467

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Claims Denied Report* February 2005

Processing Month	Plan 1A		Plan 1B		Plan 2		All Plans			
	Paid	Denied	Paid	Denied	Paid	Denied	Paid	Denied	Total Processed	Denial Rate
February 2004							28,482	15,854	44,336	35.8%
March 2004	12,937	6,049	7,139	3,671	4,094	2,420	24,170	12,140	36,310	33.4%
April 2004	16,145	6,557	9,583	4,109	5,364	2,833	31,092	13,499	44,591	30.3%
May 2004	13,862	5,916	8,378	3,787	4,326	2,234	26,566	11,937	38,503	31.0%
June 2004	14,320	5,412	8,906	3,554	4,796	2,041	28,022	11,007	39,029	28.2%
July 2004	14,539	5,511	9,098	3,723	4,916	2,340	28,553	11,574	40,127	28.8%
August 2004	11,258	4,409	7,199	3,018	3,743	1,643	22,200	9,070	31,270	29.0%
September 2004	11,398	4,318	7,676	3,016	3,924	1,423	22,998	8,757	31,755	27.6%
October 2004	16,461	5,752	11,535	3,880	5,751	2,013	33,747	11,645	45,392	25.7%
November 2004	12,686	4,232	9,584	3,458	4,389	1,540	26,659	9,230	35,889	25.7%
December 2004	16,889	5,819	12,715	4,376	6,458	2,602	36,062	12,797	48,859	26.2%
January 2005	12,980	4,239	9,710	3,192	4,542	1,741	27,232	9,172	36,404	25.2%
February 2005	12,985	5,197	9,862	3,935	4,884	2,011	27,731	11,143	38,874	28.7%

*Claims denied by the PBM are not included. See page 30 for claims denied by the PBM. Detailed paid versus denied claims reporting began in March 2004.

***Denied claims increased due to HIPAA changes. Providers were not following HIPAA billing instructions.

February 2005 - Denial Reason Detail**

Top Reasons for Denial		Volume
380	Pre-X	3,420
A97	Claim indicator missing or invalid	1,988
A22	Billing provider number invalid or incorrect	1,933
401	Duplicate Claim - Professional	1,923
A02	Policyholder number not on file	1,439
172	Policyholder not eligible for date of service	1,325
187	Lack of medical necessity	1,102
152	Provider not eligible on date of service	644
183	Procedure to Provider type	608
192	Procedure requires Medical Necessity	560
574	Procedures billed on same date of service	373
246	Procedure Requires Modifier	366
177	Place of Service invalid	356

**Denial codes apply to individual service details. Claims may have more than one service detail; therefore, the number of denials shown here represents the number of denied service details, not the number of denied claims.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
PHARMACY CLAIMS DENIED BY PBM

Claims Denied Report
February 2005

Mar-04	13,260
Apr-04	9,383
May-04	7,614
Jun-04	8,148
Jul-04	8,570
Aug-04	8,297
Sep-04	9,048
Oct-04	13,104
Nov-04	8,873
Dec-04	8,555
Jan-05	8,664
Feb-05	7,627

February 2005 - Reason Detail

*	Top Reasons for Denial	Volume
	47 - Early refill	2,901
	29 - Invalid/excessive days supply	1,078
	74 - Drug Utilization Review	780
	35 - Prior Authorization required	726
	05 - Non-covered prescription item	578
	03 - Date filled beyond cancel / ID card expired	407
	22 - Non legend items not covered	296
	04 - Duplicate claim	254
	26 - Received beyond allowed time for submission	119
	27 - Invalid/Missing Patient Birthdate	113

*In the PBM environment, each prescription processed is counted as one claim.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Claims Accuracy Performance* February 2005

MONTH	CLAIMS	CLAIM PAYMENTS	PAYMENTS REVIEWED	CORRECT PAYMENT	ACCURACY RATE
Feb-04	44,336	\$5,635,317	\$74,158	\$73,901	99.65%
Mar-04	35,840	\$5,549,043	\$78,006	\$78,006	100.00%
Apr-04	44,591	\$6,948,734	\$51,662	\$51,662	100.00%
May-04	38,503	\$6,050,073	\$64,896	\$64,833	99.90%
Jun-04	39,029	\$5,640,805	\$49,747	\$49,826	99.84%
Jul-04	40,127	\$7,059,137	\$80,036	\$80,036	100.00%
Aug-04	31,270	\$5,264,531	\$49,875	\$49,875	100.00%
Sep-04	31,755	\$4,024,798	\$86,524	\$86,524	100.00%
Oct-04	45,392	\$8,169,270	\$63,287	\$63,287	100.00%
Nov-04	35,889	\$6,631,268	\$79,182	\$79,156	99.97%
Dec-04	48,859	\$9,595,500	\$52,645	\$52,645	100.00%
Jan-05	36,404	\$6,551,366	\$95,201	\$95,201	100.00%
Feb-05	38,874	\$6,256,306	\$80,016	\$80,016	100.00%

* Claims processed through PBM are not included in the performance statistics.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
APPEALS AND GRIEVANCE SUMMARY
February 2005**

CLAIM APPEALS

REINSTATEMENTS	7
PA DENIAL	1
WAIVE PRE-X	2
DENIAL OF COVERAGE	3
PRE-X CLAIM DENIAL	8
OTHER	4
TOTAL CLAIMS/REINSTATEMENTS CLOSED	29
CLAIM APPEALS AVERAGE NUMBER OF DAYS	14.84

GRIEVANCES

GRIEVANCE COMMITTEE REVIEW:

WAIVER FOR PRE-EXISTING CONDITION	1
REQUEST FOR REINSTATEMENT	2
REQUEST FOR MEDICAL NECESSITY	2
REQUEST FOR LATE BILLING OVERRIDE	2
REQUEST FOR GASTRIC BYPASS	1
NON CERTIFIED PROVIDER	1